## PART B - FEE(S) TRANSMITTAL

Complete and sen this form wogether

ith applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be to INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where appropriate. All further correspondence including the Patent, advance orders and notification of maintenance fees will be mailed to the current correspondence address as indicated unless corrected below or directed otherwise in Block 1, by (a) specifying a new correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for maintenance fee notifications.

CURRENT CORRESPONDENCE ADDRESS (Note: Use Block I for any change of address)

21254

10/25/2006

MCGINN INTELLECTUAL PROPERTY LAW GROUP, PLLC 8321 OLD COURTHOUSE ROAD

SUITE 200

VIENNA, VA 22182-3817

Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.

Certificate of Mailing or Transmission

I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.

(Depositor's name)	and Delivered
(Signature)	
(Date)	

APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO.
10/824,634	04/15/2004	Satoshi Yamada	P21-169760M/ISI	6521
TITLE OF INVENTION: SI	DE LOCK APPARATUS F	OR STORAGES		

APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	NO	\$1400	\$300	\$0.	\$1700	01/25/2007		
EXAMINER ART UNIT		ART UNIT	CLASS-SUBCLASS	01/25/2007 HMARZ12 U00UU189 10824634				
LUGO, CARLOS 3676		3676	292-032000	01 FC:1501		1400.05 OF		
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).			2. For printing on the p	atent fron page [181]01	nevs 1 McGinn	200.00 UP TP 10.00 UP		
Change of correspondence address (or Change of Correspondence		inge of Correspondence	or agents OR, alternatively,					
Address form PTO/SB/122) attached.  "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.			(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
3. ASSIGNEE NAME A	3. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type)							
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment.								
(A) NAME OF ASSIGNEE  (B) RESIDENCE: (CITY and STATE OR COUNTRY)								
:	Piolax, Inc.			ama-shi, Kana	_			
Please check the appropriate assignee category or categories (will not be printed on the patent): 🔲 Individual 🔀 Corporation or other private group entity 🚨 Government								
4a. The following fee(s)	are submitted:	4է	. Payment of Fee(s): (Plea	se first reapply any prev	iously paid issue fee sh	own above)		
	No small entity discount p		Payment by credit card. Form PTO-2038 is attached. (Deficiencies Only)					
Advance Order -	# of Copies	<u> </u>	The Director is hereby overpayment, to Depos	authorized to charge the r sit Account Number <u>50</u>	required fee(s), any defic . <u>0481                                    </u>	iency, or credit any extra copy of this form).		
	tus (from status indicate	• • • • • • • • • • • • • • • • • • • •	_					
	s SMALL ENTITY state		b. Applicant is no long	,				
NOTE: The Issue Fee an interest as shown by the	d Publication Fee (if requeecords of the United Sta	uired) will not be accepted tes Patent and Trademark	I from anyone other than the Office.	ne applicant; a registered a	ttorney or agent; or the	assignee or other party in		
Authorized Signature	AMP	~		D## <u>:⊶Januar</u>	y 24, 2007			
Typed or printed nam	Scott M.	Pulino, Esq.	-1	Registration No. 4	8,317			
This collection of inform	ation is required by 37 C	FR 1.311. The informatio	n is required to obtain or re	tain a benefit by the publ	ic which is to file (and b	y the USPTO to process)		

an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, Virginia 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450.

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.